


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 07, 2006 8:00 am
Secretary of State

05-01-2006 90068 037 ****50.00

DOCUMENT # M00000000086					
1. Entity Name CARTER & ASSOCIATES SERVICES, L.L.C.					
Principal Place of Business 171 17TH STREET SUITE 1200 ATLANTA, GA 30363			Mailing Address 171 17TH STREET SUITE 1200 ATLANTA, GA 30363		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 58-2171375	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301				7. Name and Address of New Registered Agent	
				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	FL Zip Code
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CARTER & ASSOCIATES LLC 1275 PEACHTREE ST. ATLANTA, GA 30309 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <i>See Attached</i>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PETERSON, ROBERT 675 PACES FERRY RD ATLANTA, GA 30327 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP PFEIFER, CYNTHIA 4010 AMBERFIELD CIR NORCROSS, GA 30092 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP GERMANO, TRENT A 3367 KENNINGTON CT ATLANTA, GA 30319 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <i>See Attached</i>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP REESE, BRAD 175 OVERTON DR ATLANTA, GA 30342 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>See Attached</i> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>See Attached</i> <input type="checkbox"/> Change <input type="checkbox"/> Addition	
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: <u>Lori Giacomelli</u> Lori Giacomelli			Date: <u>4/23/2006</u> 404-888-3000		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			<small>Date Daytime Phone #</small>		

30009758



02222006 Chg-LLC CR2E083 (11/05)

ATTACHMENT

30009758

CARTER & ASSOCIATES SERVICES, LLC

#M 80000000086

ROBERT PETERSON

TITLE
Manager

ADDRESS
675 W PACES FERRY ROAD
ATLANTA, GA 30327
(404)888-3000

A. TRENT GERMANO

Manager

615 REGENCY FOREST COURT
ATLANTA, GA 30342
(404)888-3000

JOHN E. CARTER

Manager

2626 SUNSET DR.
TAMPA, FL 33629
(812) 287-0101

R. SCOTT TAYLOR, JR

Manager

2541 DELLWOOD DRIVE
ATLANTA, GA 30305
(404)888-3000

JAMES SHELTON

Manager

3290 WOOD VALLEY ROAD
ATLANTA, GA 30309
(404)888-3000

CARTER & ASSOCIATES ENTERPRISES, INC.

Managing Member

171 17TH STREET
SUITE 1200
ATLANTA, GA 30363
(404)888-3000

CARTER & ASSOCIATES, LLC

ATTACHMENT
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ROBERT PETERSON
MEMBER

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675 W PACES FERRY ROAD
ATLANTA, GA 30327
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CARTER & ASSOCIATES ENTERPRISES, INC 171 17TH STREET
MANAGING MEMBER

SUITE 1200
ATLANTA, GA 30363
(404)888-3000



ATTACHMENT

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 11, 2006

CARTER & ASSOCIATES SERVICES, L.L.C.
171 17TH STREET
SUITE 1200
ATLANTA, GA 30363

Subject: CARTER & ASSOCIATES SERVICES, L.L.C.

Reference Number:

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Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Provide the title(s) of each manager, managing member or principal listed on the report or on an attachment.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

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ANNUAL REPORTS SECTION